



CABINET FOR HEALTH SERVICES
COMMONWEALTH OF KENTUCKY
FRANKFORT, 40621-0001



DEPARTMENT FOR MEDICAID SERVICES
"An Equal Opportunity Employer M/F/D"

October 9, 2003

Home and Community Based Waiver # A-57

Dear Home and Community Based Waiver Providers

The Department for Medicaid Services (DMS) has implemented several process changes to ensure service payments continue to providers while a level of care recertification case is in appeal. Specifically, the Peer Review Organization (PRO) will adjust prior authorization end-dates on these cases twice: once when the PRO is notified of an appeal request being received by Program Integrity (PI) and then again when the appeal is concluded.

End-dates will be lengthened indefinitely when the PRO receives initial notification from PI. The final adjustment that will be made to a recipient's file will be made when the hearing officer's final order is received which will establish the final end-date needed for that case. Providers are cautioned that any overpayments made by DMS during processing of the appeals in this manner will be recouped under the provisions of existing regulations.

With these changes, it is our intent to preclude interruption of payments to providers while the appeal process is in progress. We are confident we have updated all appealed cases that were previously denied.

Please resubmit previously denied service claims for these recipients upon receipt of this letter. If such a claim continues to be denied by UNISYS (DMS' fiscal agent) after resubmitting, please contact Kristina Reece at (502) 564-5560.

Sincerely,

Mike Robinson
Commissioner

MR/bs/tb

"...promoting and safeguarding the health and wellness of all Kentuckians."

